24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
FREEDOMWORKS FOR AMERICA					
	C C00499020				
Check if 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee	Date of Public Distribution/Dissemination				
Campaign Marketing Strategies	M M / D D / Y Y Y Y Y				
Mailing Address 3240 Wilson Blvd., Ste. 202	10 20 2014 Amount				
	4700.00				
City State Zip Code Arlington VA 22201	1738.33 Transaction ID : SE.51713				
- mig-in	Date of Disbursement or Obligation				
Purpose of Expenditure IE-Didier-Telemarketing Category/ Type 004	10 20 / 2014				
Name of Federal Candidate Support Office	e Sought: X House District:04				
CLINT DIDIER Oppose	President Senate State: WA				
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary				
Full Name of Payee	Date of Public Distribution/Dissemination				
Campaign Marketing Strategies	10 20 2014				
Mailing Address 3240 Wilson Blvd., Ste. 202	20 2014				
52.16 17.165.1. 2014	Amount				
City State Zip Code	2582.45				
Arlington VA 22201	Transaction ID : SE.51714 Date of Disbursement or Obligation				
Purpose of Expenditure LE Religuin Telementating Category/ Category/	M - M / D - D / Y - Y - Y				
Type Type	10 20 2014				
Name of Federal Candidate Support Office	e Sought:				
BRUCE L POLIQUIN Oppose	President Senate State: ME				
Calendar Year-To-Date Per Election for Office Sought Disbut 2014					
	Other (specify) -				
(a) SUBTOTAL of Itemized Independent Expenditures	4320.78				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
	7 7 7				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Matt Kibbe	M / D D / Y Y Y Y				
[Electronically Filed] Date Signature	21 2014				
9					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LAI LIIDI	TOTILO		PAGE 2 OF 4 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA				FEC IDENTIFICATION NUMBER ▼	
FREEDOMWORKS FOR AMERICA				C C00499020	
Check if 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee Delta Airlines				of Public Distribution/Dissemination	
Mailing Address PO Box 20706			Amou	10 19 2014 nt	
City	State	Zin Codo		25.00	
Atlanta	GA	Zip Code 30320		action ID : SE.51711 of Disbursement or Obligation	
Purpose of Expenditure IE-Didier-Travel		Category/ Type 002		10 19 2014	
Name of Federal Candidate		X Support	Office Sough	t: X House District:04	
CLINT DIDIER		Oppose	Preside	10/0	
Calendar Year-To-Date Per Election for Office Sought	, , ,	56473.54	Disbursemen 2014 O	t For:	
Full Name of Payee Dungeness Bay				of Public Distribution/Dissemination	
Mailing Address 17801 Internation Blvd. S.			Amou	10 19 2014	
			Amou		
City Seattle	State WA	Zip Code 98188		35.61 ction ID : SE.51712	
Purpose of Expenditure IE-Didier-Travel		Category/ Type 002		of Disbursement or Obligation 10 19 2014	
Name of Federal Candidate		X Support	Office Sough	t: X House District: 04	
CLINT DIDIER		Oppose	Preside	ent Senate State: WA	
Calendar Year-To-Date Per Election for Office Sought	, ,	56509.15	Disbursemer 2014 C	t For:	
(a) SUBTOTAL of Itemized Independent Expenditures	3			60.61	
(b) SUBTOTAL of Unitemized Independent Expenditu	res			7 1 7 1 7 1	
(c) TOTAL Independent Expenditures			· .	7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Matt Kibbe	[Electron	ically Filed] Date	10	21 2014	
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 4 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
FREEDOMWORKS FOR AMERICA	C C00499020				
Check if 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee Freedomworks, Inc.	Date of Public Distribution/Dissemination				
Mailing Address 400 N Capitol St., NW	10 20 2014 Amount				
Suite 735					
City State Zip Code Washington DC 20001	116.46 Transaction ID : SE.51715				
Purpose of Expenditure IE-Didier-Email/Social Media/Printing Category/ Type	Date of Disbursement or Obligation 004 10 20 2014				
Name of Federal Candidate Sup	port Office Sought: X House District: 04				
CLINT DIDIER Opp					
Calendar Year-To-Date Per Election for Office Sought 58363.94	Disbursement For: Primary ☐ General 2014 ☐ Other (specify) ▶				
Full Name of Payee Freedomworks, Inc.	Date of Public Distribution/Dissemination 10 20 2014				
Mailing Address 400 N Capitol St., NW					
Suite 735	Amount				
City State Zip Code	118.74				
Washington DC 20001 Purpose of Expenditure	Transaction ID : SE.51717 Date of Disbursement or Obligation				
IE-Poliquin-Email/Social Media/Printing Category/ Type	004				
Name of Federal Candidate Sup	port Office Sought: X House District: 02				
BRUCE L POLIQUIN Opp	ose President Senate State: ME				
Calendar Year-To-Date Per Election for Office Sought 48060.08	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures	235.20				
(b) SUBTOTAL of Unitemized Independent Expenditures	······································				
(c) TOTAL Independent Expenditures	······································				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Matt Kibbe [Electronically Filed]	Date 10 21 2014				
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	123	PAGE 4 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼			
FREEDOWWORKS FOR AWERICA		C C00499020			
Check if 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee Hilton-WA		of Public Distribution/Dissemination			
	[10 19 2014			
Mailing Address 17620 International Blvd S.	Amou	unt			
City State Zip C	Code	0.57			
Seattle WA 9818		saction ID : SE.51710 of Disbursement or Obligation			
Purpose of Expenditure IE_Didier-Travel Cat		10 19 2014			
Name of Federal Candidate	X Support Office Sough	ht: X House District:04			
CLINT DIDIER	Oppose Presid	lent Senate State: WA			
Calendar Year-To-Date Per Election for Office Sought 5644	Disbursemen 2014	nt For: Primary			
Full Name of Payee	Date	of Public Distribution/Dissemination			
		M M / D D / Y Y Y Y			
Mailing Address	Amou	unt			
City State Zip C	Code				
	Doto	of Dioburgement or Obligation			
Purpose of Expenditure Cat	egory/ Type	of Disbursement or Obligation			
Name of Federal Candidate	Support Office Soug	ht: House District:			
	Oppose Presid	dent Senate State:			
Calendar Year-To-Date Per Election for Office Sought	Disburseme	nt For:			
-					
(a) SUBTOTAL of Itemized Independent Expenditures	·····	0.57			
(b) SUBTOTAL of Unitemized Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	711711			
(c) TOTAL Independent Expenditures	······································	4617.16			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Matt Kibbe [Electronically Signature	Filed] Date 10	21 2014			
Oignature					